		ENT APPLI	Effective	ve Oci	ober 1, 2	MINA 003	ITION RE	CO	RD		10	1	Dr.Docket) د
		CLAI		FILE	- PART		·			10	19/	6%	<u>1590</u>	3/
	TOTAL CL	AIMS		(Colu	mn 1)	(Cc	olumn 2)		. TYP	E [NTÍTY	C	OTI OR SMA	HER TH
FOR				NUMBER FILED					<u> </u>	ATE	FEE		RAT	
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INDEPENDENT CLAIMS				minus 3 =		*		\dashv	XS	9=)=		A . X\$18	3=
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2	n l	CLAIMS					column 2		тот	AL		Joi	ATOTA	
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	nd pendent		Minus		<u>" 33</u>	2	= 0 - A		X\$-9=			OR	X\$18=	FEI
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To	al	REMAINING AFTER AMENDMENT	~ ~~~~	_	HIGHEST NUMBER PREVIOUSLY PAID FOR	١.	PRESENT EXTRA		RATE	ADI TION FE	AL	٠[RATE	ADDI- ANOIT
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the	entry in colum	nn 1 is less than t	he entry in	Column	2 umito sos in		- 		145=		OF	1	290=	
	Highest Nun	iber Previously Patter Previously Patter Previously Patter Previously Patter	ald For IN	THIS SE	ACE is tose H	222.20	13,		TOTAL			<u> </u>	TOTAL	